



**BOYS & GIRLS CLUBS**

## CONFIDENTIAL ENROLLMENT FORM

In consideration of the impact that Boys & Girls Clubs of Wichita Falls has on the lives of young people and adults, I/we have made provision for a gift to the Club in my/our estate plan. Understanding that the Club Trustees have established The Heritage Club to recognize individuals who made such a commitment, I/we are pleased to authorize the Club to include me/us as a member of The Heritage Club.

**Please print or type**

Title	Name	Name of Spouse
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Address

City	State	Zip Code
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Name (s) for recognition purposes

Daytime Telephone _____	Evening Telephone _____
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E-Mail Address _____	Date of Birth _____
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(Please include area code with telephone numbers)

**Relationships with Boys & Girls Clubs of Wichita Falls**

- |   |   |                                      |
|---|---|--------------------------------------|
| <input type="checkbox"/> Board of Directors (current or past) | <input type="checkbox"/> Parent/Grandparent | <input type="checkbox"/> Volunteer   |
| <input type="checkbox"/> Alumnus                              | <input type="checkbox"/> Friend             | <input type="checkbox"/> Other _____ |
|   | <input type="checkbox"/> Staff              |                                      |

**Gift Information**

I/we qualify for The Heritage Club through the following planned gift:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Bequest (or Living Trust) | <input type="checkbox"/> Charitable Remainder Annuity Trust | <input type="checkbox"/> IRA/Retirement Plan Beneficiary                     |
| <input type="checkbox"/> Dollar amount             | <input type="checkbox"/> Charitable Remainder Unitrust      | <input type="checkbox"/> Gift of Residence or Farm with Retained Life Estate |
| <input type="checkbox"/> Stock or property         | <input type="checkbox"/> Deferred Charitable Gift Annuity   | <input type="checkbox"/> Charitable Lead Trust                               |
| <input type="checkbox"/> Percentage bequest        |   | <input type="checkbox"/> Life Insurance Policy                               |
| <input type="checkbox"/> Residuary bequest         |   |  |
| <input type="checkbox"/> Charitable Gift Annuity   |   |  |

Please indicate the approximate current market value of the planned gift named above:

\$ \_\_\_\_\_ (Optional. Will be treated as confidential.)

The gift is:

- Unrestricted                      Restricted as follows: \_\_\_\_\_
- I/ we wish to remain an anonymous member of The Heritage Club.

Signature: _____	Date: _____
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Reported by: _____	Date: _____
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Title/Position \_\_\_\_\_